

# **Governor's Workforce Investment Board Healthcare Taskforce**

**Capitol Building, Helena  
July 19, 2006**

## **MINUTES**

**Committee Members Present:** Keith Kelly, Deb Matteucci, Scot Mitchell, and Pat Wise.

**Committee Members Present via Conference Call:** Karen Sullivan, Chair; LeeAnna Muzquiz, MD; and Cindy Stergar.

**Committee Members Absent:** Beverly Barnhart; Mike Downing, DDS; and Wendy Palmer.

**Staff:** Emily Lipp Sirota, Pam Watson, Leisa Smith, and Chris Wilhelm.

**Guests:** BeverLee Frederick, Angela Chou, Kristin Juliar, Sarah Annarella, Brad Eldredge, Mark Maki, Tyler Turner, Todd Younkin, Tyler Trevor, and JoAnn Dotson.

**Guests Present via Conference Call:** Jeannie Worsech.

### **Welcome and Introductions**

Chair Sullivan welcomed members and guests. Keith Kelly was introduced as a new member of the taskforce. Chair Sullivan requested members and guests state their name prior to speaking, due to the nature of conference calls, and to ensure accuracy of the minutes.

Chris Wilhelm conducted roll call. She stated although this meeting's volume of documents was not standard, she had identified some challenges and solutions regarding the document distribution process and would be e-mailing a summary of findings and a brief survey to help streamline the process. Ms. Wilhelm also stated the documents from this meeting would be posted on the SWIB website for future reference.

Cindy Stergar moved to relax Roberts Rules of Order to facilitate more fluid discussion; Pat Wise seconded the motion, and the motion carried.

Mr. Kelly announced he had attended a Board of Nursing meeting and they are interested in the taskforce's work.

### **Approval of Agenda**

Leisa Smith announced Ingrid Childress could not attend but had sent Bev Frederick to discuss her information. Leisa suggested moving Ms. Childress' presentation to the beginning of the Information Items section of the agenda to accommodate Ms. Frederick's tight schedule. The taskforce agreed by consensus, and the agenda was approved as amended.

### **Approval of Previous Minutes**

Ms. Stergar moved to approve the minutes, LeeAnna Muzquiz seconded the motion. The motion carried.

## **Discussion Items**

### Workforce Services Division

Bev Frederick, Supervisor of the Computer Programming Staff for Workforce Services Division, spoke about the number of job orders for health care positions (handout H-01). At the last meeting, the taskforce requested information regarding the number of health care related position postings from the current and archived job registry systems. Ms. Frederick stated the information cannot be summarized as requested. She said there are 12 ONET codes that are health care related. She also said some job orders remain open long-term, however they will automatically close after 90 days of no activity. She agreed to provide the ONET codes and relating titles, sort the data by community, provide the ultimate outcome for closed work orders, and provide a separate spreadsheet of data for state facilities.

### Research and Analysis

Brad Eldredge spoke about the Healthcare Occupations Data he compiled (handout H-02). He also reference the Department of Commerce's report and map of the number of people age 65 and older projected by county in the year 2030 (handouts H-03 and H-04), a map indicating the number of people in Montana age 65 and older (handout H-05), and a map indicating the percent of the population age 65 and older (handout H-06). The Healthcare Occupations Data handout shows wages only (not including benefits) for various health care groups. He discussed the similarities and differences between his data and the MHA data. Mr. Eldredge cautioned members to keep in mind there might not be a statewide shortage, but a regional shortage could still exist. He also advised dental and some psychiatric-related providers were not accurately reflected because privately employed individuals were not included in his statistics. Mr. Eldredge noted Physicians Assistants (PAs) and Nurse Practitioners are not required to be broken out for the feds, so they were not broken out in the provided statistics. He stated he chose nurses and nursing aids for his data because there is enough of each occupation to release statistics by region. He agreed to provide a breakdown of Advance Practice Nurses (APNs), Registered Nurses (RNs), Psychiatrists, and Psychologists (also known as "driving occupations"); Mental Health Technicians, and Addiction Councilors; the precise state average wage, and to provide it in the form of data rather than charts.

Pat Wise stated hospital and acute care information is available through the Montana Nurses Association (MNA), but that it would not include private clinic and office RNs.

### Montana Hospital Association (MHA)

Roberta Yager was not able to attend the meeting. Mr. Eldredge stated he had seen her data but was not comfortable speaking on her behalf. Ms. Yager's presentation will be moved to the next agenda.

### Licensing

Jeannie Worsech, from Licensing, attended for Lisa Addington. She said they were still compiling information, which required some manual processes. Ms. Worsech said Licensing collected preferred mailing addresses, not addresses of where the member practiced. Data could be skewed because a practitioner may live in Helena but practice in Sidney. Traveling nurses and locum physicians would affect the data similarly. She said she could provide data without wages for APNs and RNs, and that the data licensing had been collecting for the taskforce would be provided by the end of the week.

### Montana Nurses Association (MNA)

Pat Wise, from the MNA, spoke about the challenges facing recruitment and retention of nurses (handout H-07). She discussed the Elements of Job Satisfaction report (handout H-08). Ms. Wise said the report is based on a survey conducted by the American Nurses Association (ANA). She recommended using the data from the survey to develop strategies to recruit and retain RNs by focusing on the weakest areas. Ms. Wise discussed the North Central Montana Rural Nursing Education Partnership Final Pilot Project Report, prepared by Montana State University in November 2005 (handout (H-09) which addressed long-distance learning. This report indicates long-distance learning is an option for academic portions of curriculum, but not for clinical portions.

In summary, certain areas within the state need special strategies to address recruitment and retention. The top three retention issues remain staffing ratios for safety issues; participatory aspects; and benefits such as, child care and health care. An issue was identified when new practitioners are placed in acute care areas. Practitioners feel overwhelmed, but this can be addressed by an advanced orientation that involves mentoring or proctoring. Ms. Wise offered to obtain community specific information from the MNA and MHA.

#### Dental

Mike Downing of the Yellowstone City-County Health Department could not attend the meeting. Mr. Downing forwarded comments about the Montana Dental Workforce Analysis prepared in May of 2001 by the WWAMI Center for Health Workforce Studies (handout H-10) and the Actively Practicing Montana Dental Association Members information (handout H-11). He said smaller towns in Eastern Montana are becoming concerned regarding the ratios of number of dentists to the number of people those dentists are serving. Not as many dentists are retiring due to shortages and need. Major shortages will be seen in four to five years. Mr. Downing indicated recruitment was a major issue for smaller communities. Dental clinics are difficult to set up and expensive. Larger communities in Montana are more successful at recruiting dentists, however many new dentists are not accepting patients with Medicaid or the un-insured.

Emily Lipp Sirota stated she had met with DPHHS staff July 18, 2006 to let them know about the Healthcare Taskforce.

#### Apprenticeship and Training

Mark Maki, Apprenticeship and Training Director, gave an overview of the program and their mission. He said the Apprenticeship and Training Program registers apprentices, monitors for compliance and completion, and certifies apprentices. The program does not solicit apprentices, but does set up apprenticeships at an employer's request if apprenticeship criteria are met. Information is provided to the public at job fairs. Mr. Maki stated 85% of Montana's apprenticeships are in the construction industry, with the remaining 15% in the service and utility industries. Mr. Maki discussed the Pharmacy Tech apprenticeship, outlining the process required to set it up, who was involved and where it is today. He gave examples of apprenticeships that do not follow the stereotype: Montana PEAKS, located in the Flathead area, is a non-profit organization training women in non-traditional trades. White Sulphur Springs has an apprenticeship for Hospital Medical Record Keeping. Mr. Maki agreed to provide a list of health care apprentice-able trades in Montana and through the federal government.

#### White Sulphur Springs Hospital

Katherine Ann Campbell, CEO of the White Sulphur Springs Hospital could not make this meeting. She will be moved to a future agenda.

## **Committee Discussion**

Wheatland Memorial Hospital received the Montana Hospital Association 2004 Innovation Award two years ago Recognizing the telepharmacy program they implemented. This is the first, and only, telepharmacy in Montana. It allows patients' prescriptions to be filled with a consulting pharmacist 90 miles away in Billings.

Chair Sullivan reminded the taskforce the Governor is looking for recommendations to help address workforce shortages. She stated OCHE's task force is working on more long-term issues and solutions. This taskforce has only until September to address legislative issues. Ms. Sirota said this task force won't be comprehensive, and that it should select some issues to target. She gave examples such as suggesting long-term issues to watch, suggesting additional information to be collected by licensing boards, looking at recruiting as a loan repayment tool, and other glaring issues. Ms. Stergar suggested looking at the "drivers" of care and how to support them. She said possible items to address could be training availability, a loan repayment program similar to the National Health Service Core, partnering with Native American college programs, and partnering grants with Montana schools. Deb Matteucci asked which of the 15 recommendations outlined by the Blue Ribbon Task Force had been addressed and to what extent. Ms. Sirota stated she could obtain the information and paraphrase it for the taskforce. She stated OCHE is coordinating a data group, and the Governor's office would like data coordinated among state agencies. This could extend to the private sector.

Due to time restraints, next steps will be discussed via email and prepared for the next meeting.

## **Next Meeting**

The next meeting will be set via email.

## **Adjournment**

Having no further business, the meeting was adjourned at 11:55 am.

## **Summary of Commitments**

Lisa Addington / Jeannie Worsech

- Data without wages for APN's and RN's
- Licensing data from previous meeting

Brad Eldredge

- Breakdown of APNs, RNs, Psychiatrists, Psychologists, Mental Health Technicians, and Addiction Councilors
- Precise state average wage
- Data that drove his charts

Bev Frederick

- ONET codes and relating titles
- Sort data by community
- Ultimate outcomes for closed work orders
- Data for state facilities

Mark Maki

- List of health care apprentice-able trades in Montana and through the federal government.

Emily Lipp Sirota

- BRTF 15 recommendations status and results, paraphrased

Leisa Smith

- Set next meeting date

Karen Sullivan

- Initiate next steps discussion via email

Chris Wilhelm

- Email summary of issues / solutions regarding electronic document distribution
- Email brief survey regarding electronic document distribution

Pat Wise

- Hospital and Acute Care wage information
- Community-specific information

Roberta Yager

- Current survey information from MHA